

FROM McANDREWS, HELD, &amp; MALLOY

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PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>		Application Number	09/699,019
		Filing Date	October 27, 2000
		First Named Inventor	Ahmadreza Rofougaran
		Art Unit	2682
		Examiner Name	Marceau Milord
Total Number of Pages in This Submission	23	Attorney Docket Number	15258US05

**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Response (19 Pages)	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Return-Receipt Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	Extension of Time Request filed in Duplicate.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm	McAndrews Held & Malloy, Ltd.
Signature	<i>Michael T. Cruz</i>
Printed Name	Michael T. Cruz
Date	February 7, 2006

**CERTIFICATE OF FAX TRANSMITTAL**

I hereby certify that this correspondence is being sent via facsimile transmission to Examiner Marceau Milord at the United States Patent and Trademark Office, fax No. 571 273 8300, on February 7, 2006.

Name (Print/Type)	Michael T. Cruz	Registration No. (Attorney/Agent)	44,636
Signature	<i>Michael T. Cruz</i>	Date	February 7, 2006

**RECEIVED**  
 FROM McANDREWS, HELD, & MALLOY **CENTRAL FAX CENTER** (TUE) 2. 7' 06 14:35/ST. 14:32/N0. 4861050665 P 3  
**FEB 07 2006**

PTO/SB/17 (12-04)  
 Approved for use through 07/31/2008. OMB 0651-0032  
 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Fees pursuant to the consolidated Appropriates Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL for FY 2005

<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(S)</b>	120.00	Attorney Docket No.

METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 13-0017 Deposit Account Name: McAndrews Held & Malloy

For the above-identified deposit account, the Director is hereby authorized to (check all that apply)

Charge Fee(s) indicated below

Charge Fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fees(s)  Credit any overpayments under 37 CFR 1.16 and 1.17

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid(\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### 2. EXCESS & CLAIM FEES

##### Fee Description

Each claim over 20, or for Reissues, each claim over 20 and more than in the original patent

Small Entity

Fee (\$) Fee (\$)

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

Total Claims

Extra Claims

Fee (\$)

Fee Paid (\$)

Multiple Dependent Claims

Fee Fee Paid (\$)

0

-20 or HP x 50 = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20

Indep. Claims

Extra Claims

Fee (\$)

Fee Paid (\$)

-3 or HP

x 200 = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(\$).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100	/50	(round up to a whole number)	x	=

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fee Paid (\$)

Other: Petition for One-Month Extension of Time

120.00

#### SUBMITTED BY

Signature	<u>Michael T. Cruz</u>	Registration No. (Attorney/Agent)	44,635	Telephone	(312) 775-8084
Name (print/type)	Michael T. Cruz		Date	February 7, 2006	